

Healthcare Cabinet Meeting Minutes

February 11, 2020

Meeting Date	Meeting Time	Location
February 11, 2020	9:00 a.m. - 11:00 a.m.	LOB 1D

Participant Name and Attendance

Healthcare Cabinet Member					
Victoria Veltri		Nancy Navarretta		Jill Zorn	
Patricia Baker		Ellen Andrews		David Whitehead	
Anne Foley		Heather Aaron		Kurt Barwis	
Valencia Bagsby-Young		Nicole Taylor			
Paul Lombardo		Rev. Robyn Anderson			
James Michel		Sean King			
Theodore Doolittle		Deidre Gifford			
Shelly Sweatt		Nichelle Mullins			
Susan Adams		Cassandra Murphy			
Members Via Phone					
Hussam Saada		Danielle Morgan			
Margherita Giuliano					
Others Present					
Miriam Miller					
Kimberly Martone					
Members Absent					
William Handelman		Francis Padilla			
Alan Kaye					
Miriam Delphin-Ritmon					

	Agenda	Responsible Person(s)
1.	Call to order and Introductions	Victoria Veltri
	Call to Order The regularly scheduled meeting of the Healthcare Cabinet was held on Tuesday, February 11, 2020 at the LOB 1D. The meeting convened at 9:05 a.m. Victoria Veltri presiding introductions were made.	
2.	Public Comment	Victoria Veltri
	None	
3.	Approval of January 14, 2020 HCC Meeting Minutes	Victoria Veltri
	The motion was made by Pat Baker and seconded by Susan Adams to approve the meeting minutes. Motion carried.	
4.	Health Care Challenges Specific to Individuals with Intellectual & Developmental Disabilities (IDD) and Policies & Procedures Implemented to Facilitate Appropriate Medical/Dental Care	Valencia Bagby-Young, Department of Developmental Services

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Valencia Bagby-Young, from the Department of Developmental Services presented Health Care Challenges for Individuals Served by the Department of Developmental Services. A brief history, who is eligible, individuals served by type of residence along with health care goals.

Who is Eligible:

- CT residents who have an intellectual disability, autism OR a medical diagnosis of Prader-Willi Syndrome (a neurobehavioral genetic disorder).
 - Full Scale IQ score of 69 or below as indicated on intelligence/cognitive tests; and
 - significant limitations in adaptive functioning, that began during the developmental period before the age of 18.
- Number of individuals served by DDS- 8,634 (17,199 eligible for services)

Health Care Goals:

- Improve the standard of health care for individuals with ID/DD to promote the same level of preventive care and medical treatment options that other members of the community are afforded.

These goals are accomplished by:

- Person-Centered Planning
- Multi-disciplinary Provider approach
- Community access to health care
- Minimum Preventive Care Guidelines for Persons with ID/DD
- Lifelong planning with dignity and respect

Ms. Bagby-Young also spoke of the challenges accessing healthcare; opioid crisis and end of life care.

Challenges:

- Difficulty securing community-based Primary Care Providers/Physicians (PCP) and Psychiatric Health Care Providers for individuals with ID/DD
- DDS contracts for health care services (PCP and Psychiatric Providers)
- Deferred, Limited or Declined Care - Identify best practice guidelines that are applied when healthcare providers, individuals, and/or guardians/family members defer, limit, or decline routine preventive health care. (**Health Standard #09-2: Guidelines for Deferred, Limited, or Declined Health Care**)
- Guardian consent for treatment (**Health Standard 19-1: Consent Required for Medical and Dental Procedures, Including Emergency Surgery**)

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	<p>Opioid Epidemic:</p> <ul style="list-style-type: none"> ➤ Individuals served by DDS generally do not engage in drug seeking behaviors ➤ Prescribers often maintain or add to medication regimen without removing or reducing other medications ➤ Risk of caregiver (residential or family) diversion ➤ Summary of Opioids Prescribed to Individuals Served by DDS <p>The complete presentation can be viewed at: https://portal.ct.gov/OHS/Content/Health-Care-Cabinet/Meeting-Agendas</p>	
5.	<p>Healthcare Affordability Policy Scorecard: How Connecticut Compares with Other States</p>	<p>Jill Zorn, Universal Health Care Foundation</p>
	<p>Ms. Zorn presented to the cabinet an overview of the Universal Health Care Foundation of Connecticut mission statement, Altarum’s Healthcare Value Hub and Scorecard results. Where Connecticut ranks in Healthcare Affordability Policy Scorecard and how can Connecticut do better.</p> <p>Ms. Zorn noted some of Connecticut’s Policies that address affordability:</p> <ul style="list-style-type: none"> • Expanded Medicaid coverage under the ACA • Covers parents up to 160% FPL (used to be 201%) • Offers Medicaid to legally present immigrant children and pregnant women • Passed protections re: surprise medical bills • Limits on short term health insurance plans • State-based exchange with standard plan designs that put some services before the deductible <p>The recommendations from the Scorecard on how Connecticut can do better were as follows:</p> <ul style="list-style-type: none"> • Expand premium subsidies • Conduct strong(er) rate review • Waive or reduce cost-sharing for high-value services • Create a permanently convened health spending oversight entity • Create all-payer healthcare spending and quality benchmarks <p>For more information on the presentation please see the link below: https://portal.ct.gov/OHS/Content/Health-Care-Cabinet/Meeting-Agendas</p>	
6.	<p>Next Steps Next meeting will be on March 10, 2020</p>	
	<p>Adjourn</p>	